



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

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| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | | Application Number 09/752,836 |
| | | Filing Date January 3, 2001 |
| | | First Named Inventor Bunki INAGAKI, et al. |
| | | Group Art Unit 2872 |
| | | Examiner Name Mark A. Robinson |
| Total Number of Pages in This Submission | | Attorney Docket Number 740165-279 |
| | | Appeal No.: 2005-1449 |

ENCLOSURES (*check all that apply*)

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|---|---|--|---------|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Remarks</td> <td style="padding: 5px; vertical-align: top;"> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. </td> </tr> </table> | | | Remarks | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. |
| Remarks | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. | | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm <i>or</i> Individual name | Thomas W. Cole Registration No. 28,290 Nixon Peabody LLP 401 9 th Street, N.W., Suite 900 Washington, D.C. 20004-2128 |
| Signature |  |
| Date | May 30, 2006 |

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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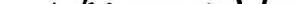
Date _____

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| | | | |
|--|----------|--------------------------|-----------------------|
| FEES TRANSMITTAL FOR FY 2005 <p><i>Payment fees are subject to annual revision.</i></p> <p><i>Applicant claims small entity status. See 37 CFR 1.27</i></p> | | <i>Complete if Known</i> | |
| | | Application Number | 09/752,836 |
| | | Filing Date | January 3, 2001 |
| | | First Named Inventor | Bunki INAGAKI, et al. |
| | | Examiner Name | Mark A. Robinson |
| | | Art Unit | 2872 |
| | | Attorney Docket No. | 740165-279 |
| TOTAL AMOUNT OF PAYMENT | \$570.00 | | |

| METHOD OF PAYMENT (check all that apply) | | | | | FEE CALCULATION (continued) | | | | |
|--|--------------------------------------|--------------------------------------|--------------------------------|-------------------------------|--|----------|--------------|----------|--|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | <input type="checkbox"/> None | 3. ADDITIONAL FEES | | | | |
| <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 19-2380 | | | | | Large Entity | | Small Entity | | |
| | | | | | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
| | | | | | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |
| | | | | | 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet |
| | | | | | 1053 | 130 | 1053 | 130 | Non-English specification |
| | | | | | 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |
| | | | | | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |
| | | | | | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |
| | | | | | 1251 | 120 | 2251 | 60 | Extension for reply within first month |
| | | | | | 1252 | 450 | 2252 | 225 | Extension for reply within second month |
| | | | | | 1253 | 1,020 | 2253 | 510 | Extension for reply within third month |
| | | | | | 1254 | 1,590 | 2254 | 795 | Extension for reply within fourth month |
| | | | | | 1255 | 2,160 | 2255 | 1,080 | Extension for reply within fifth month |
| | | | | | 1401 | 500 | 2401 | 250 | Notice of Appeal |
| | | | | | 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal |
| | | | | | 1403 | 1,000 | 2403 | 500 | Request for oral hearing |
| | | | | | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |
| | | | | | 1452 | 500 | 2452 | 250 | Petition to revive - unavoidable |
| | | | | | 1453 | 1,500 | 2453 | 750 | Petition to revive - unintentional |
| | | | | | 1501 | 1,400 | 2501 | 700 | Utility issue fee (or reissue) |
| | | | | | 1502 | 800 | 2502 | 400 | Design issue fee |
| | | | | | 1503 | 1,100 | 2503 | 550 | Plant issue fee |
| | | | | | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |
| | | | | | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |
| | | | | | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |
| | | | | | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |
| | | | | | 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) |
| | | | | | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) |
| | | | | | 1801 | 790 | 2801 | 395 | Request for Continued Examination (RCE) |
| | | | | | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |
| | | | | | Other fee (specify): Terminal Disclaimer | | | | \$120.00 |
| | | | | | *Reduced by Basic Filing Fee Paid | | | | SUBTOTAL (3) \$120.00 |
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| SUBMITTED BY | | | Complete (if applicable) | | |
|-------------------|---|--------------------------------------|--------------------------|-----------|----------------|
| Name (Print/Type) | Thomas W. Cole | Registration No. (Attorney/Agent) | 28,290 | Telephone | (202) 585-8000 |
| Signature |  | | | Date | May 30, 2006 |

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